

BUS CONDUCT REPORT

STUDENT'S NAME		GRADE
DATE OF INCIDENT	<input type="checkbox"/> 1 ST NOTICE <input type="checkbox"/> 2 ND NOTICE <input type="checkbox"/> 3 RD NOTICE	
BUS NO.	TRIP NO.	DRIVER'S NAME
NOTICE TO PARENTS		
<p>1. The purpose of this report is to inform you of a disciplinary incident involving the student on the school bus.</p> <p>2. You are urged to both appreciate the action taken by the driver and to cooperate with the corrective action initiated today.</p>		
<input type="checkbox"/> VIOLATION OF SAFETY PROCEDURES <input type="checkbox"/> DESTRUCTION OF PROPERTY <input type="checkbox"/> FIGHTING-PUSHING-TRIPPING <input type="checkbox"/> _____ 	<input type="checkbox"/> EXCESSIVE MISCHIEF <input type="checkbox"/> WRITING <input type="checkbox"/> SMOKING	<input type="checkbox"/> EATING-DRNKING-LITTERING <input type="checkbox"/> RUDE-DISOURTEOUS-ANNOYING <input type="checkbox"/> UNACCEPTABLE LANGUAGE
PRELIMINARY ACTION TAKEN: <input type="checkbox"/> HELD CONFERENCE WITH STUDENT <input type="checkbox"/> CONSULTED COUNSELOR <input type="checkbox"/> TELEPHONED PARENT <input type="checkbox"/> _____ 	PRESENT ACTION AND RECOMMENDATIONS: <input type="checkbox"/> STUDENT REGRETFUL, COOPERATIVE <input type="checkbox"/> PLACED ON PROBATION <input type="checkbox"/> RECURRENCES WILL BE REPORTED <input type="checkbox"/> SUSPENDED <input type="checkbox"/> DENIED BUS PRIVILEGE UNTIL _____ <input type="checkbox"/> REFERRED TO: _____ <input type="checkbox"/> _____ 	

Driver's Signature: _____

Date: _____

Administrator's Signature: _____

Date: _____

If a check is entered in this box. Parent please sign and return _____

Please make two (2) copies of this form; parent copy, office copy and driver's copy